

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000407899

**Entity Name:** KJD CREATIONZ LLC

**Current Principal Place of Business:**

9155 NW 57TH STREET  
APT 302  
TAMARAC, FL 33351

**Current Mailing Address:**

9155 NW 57TH STREET  
APT 302  
TAMARAC, FL 33351 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

Y WILLIAMS INSURANCE & FINANCIAL SERVICES  
1720 HARRISON STREET  
SUITE 5A  
HOLLYWOOD, FL 33020 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_

Date

**Authorized Person(s) Detail :**

Title            AMBR  
Name            DONALDSON, KIMBERLINE J  
Address        9155 NW 57TH STREET, APT 302  
City-State-Zip: TAMARAC FL 33351

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KIMBERLINE DONALDSON

MGR

04/03/2024

\_\_\_\_\_

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_

Date